

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in ink.

A Public Document

NAME (LAST) (FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
		1911 - 210 1120
ISUNCYOSH TAYTON SUND	STATE   ZIP CODE	(916) 263 4326
(Business Address Acceptable)	STATE ZIP CODE	OPTIONAL: E-MAIL ADDRESS
2000 Evergreen St Suite 100,	Socramento CA 95815	
ZOOO LINGTENA - SUITE TOO	360 000 000 110 1300	
1. Office, Agency, or Court	4. Schedule Summa	rv
Name of Office, Agency, or Court:	► Total number of pages	<b>,</b>
Department of Boating and Waterways	including this cover pa	je:
Division, Board, District, if applicable:		
Division, Board, District, if applicable.	► Check applicable sched interests."	•
Your Position:	I have disclosed interests attached schedules:	on one or more of the
	——	schedule attached
▶ If filing for multiple positions, list additional agency(i	es)/ Investments (Less than 10% Ov	
position(s): (Attach a separate sheet if necessary.	) Schedule A-2 ☐ Yes -	schedule attached
Agency:		
	Schedule B T Yes -	schedule attached
Position:	Real Property	sonsedio diagnos
	Schedule C T Yes -	schedule attached
2. Jurisdiction of Office (Check at least one	hort Income, Loans, & Business	Positions (Income Other than Gifts
State     State	and Travel Payments)	
County of	Schedule D Yes -	schedule attached
-		
City of	francis City Travel Sau	schedule attached
☐ Multi-County	Income – Gifts – Travel Pay.	TIENIS
Other	/ -O	r-
	No reportable interests	on any schedule
3. Type of Statement (Check at least one bo	x)	
Assuming Office/Initial Date://	5. Verification	
★ Annual: The period covered is January 1, 2009,		2 a
through December 31, 2009.		e diligence in preparing this this statement and to the best
-or-	of my knowledge the informa	tion contained herein and in any
O The period covered is/, throug December 31, 2009.	1 1	·
Lander Office Data Laft:		jury under the laws of the State
Leaving Office Date Left:// (Check one)	of California that the foreg	oing is true and correct.
O The period covered is January 1, 2009, through	the	
date of leaving office.	Date Signed .	
-or-		
O The period covered is/, through	1 Signature	
the date of leaving office.	Signature	)
Candidate Election Year:	-   -	

#### **SCHEDULE A-1 Investments**

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name Raynor Isunayogh	-

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income of \$0 - \$500  Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income of \$0 - \$500  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED  ► NAME OF BUSINESS ENTITY	ACQUIRED DISPOSED  ► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000
IF APPLICABLE, LIST DATE:/	IF APPLICABLE, LIST DATE://
ACQUIRED DISPOSED  NAME OF BUSINESS ENTITY	ACQUIRED DISPOSED
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT	FAIR MARKET VALUE \$2,000 - \$10,000
Stock Other (Describe)  Partnership O Income of \$0 - \$500 Income Received of \$500 or More (Report on Schedule C)	Stock Other (Describe)  Partnership Income of \$0 - \$500 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
Comments: NONE	•

#### SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name

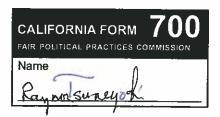
CITY	CITY
	CHY
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   \$10,001 - \$100,000     / / 09   / / 09     ACQUIRED   DISPOSED   Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000	\$0 - \$499
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source o income of \$10,000 or more.
You are not required to report loans from commercial	lending institutions made in the lender's regular course
You are not required to report loans from commercial of business on terms available to members of the puland loans received not in a lender's regular course o	blic without regard to your official status. Personal loan f business must be disclosed as follows:
of business on terms available to members of the puland loans received not in a lender's regular course o	lending institutions made in the lender's regular course blic without regard to your official status. Personal loan f business must be disclosed as follows:
of business on terms available to members of the puland loans received not in a lender's regular course o	blic without regard to your official status. Personal loan f business must be disclosed as follows:
of business on terms available to members of the puland loans received not in a lender's regular course o	blic without regard to your official status. Personal loan f business must be disclosed as follows:  NAME OF LENDER*
of business on terms available to members of the puland loans received not in a lender's regular course o  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	blic without regard to your official status. Personal loan f business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
of business on terms available to members of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not in a lender's regular course of the puland loans received not rece	blic without regard to your official status. Personal loan f business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
of business on terms available to members of the puland loans received not in a lender's regular course of the puland loans received not in a lender's received not	blic without regard to your official status. Personal loan f business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  When the personal loan follows:  TERM (Months/Years)  None
of business on terms available to members of the puland loans received not in a lender's regular course of the puland loans received not in a lender's received not	blic without regard to your official status. Personal loan f business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)
of business on terms available to members of the puland loans received not in a lender's regular course of the puland loans received not in a lender's recei	blic without regard to your official status. Personal loan f business must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
of business on terms available to members of the puland loans received not in a lender's regular course of the puland loans received not in a lender's received not	blic without regard to your official status. Personal loan f business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)  ———————————————————————————————————

#### **SCHEDULE C** Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM / () FAIR POLITICAL PRACTICES COMMISSIO	•
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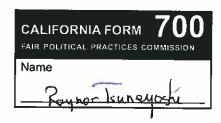
► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment	Loan repayment
	Sale of
(Property, car, boal, etc.)	(Property, car, boal, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other	
(Describe)	Other(Describe)
	İ
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	IOD
of a retail installment or credit card transaction, made	your official status. Personal loans and loans received
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
S500 - \$1,000	City
S1,001 - \$10,000	_
<b>\$10,001 - \$100,000</b>	Guarantor
OVER \$100,000	Other
	(Describe)
N- 9-	
Comments: No NE	

## SCHEDULE D Income - Gifts



NAME OF SOURCE		► NAME OF SOURCE	E	
ADDRESS (Business Address Acceptable)		ADDRESS (Busine	ss Address Acce	ptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	E	BUSINESS ACTIVI	TY, IF ANY, OF S	SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
			\$	
			\$	
			<b>\$</b>	
NAME OF SOURCE		▶ NAME OF SOURC	 E	
ADDRESS (Business Address Acceptable)		ADDRESS (Busines	ss Address Accep	otable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	E	BUSINESS ACTIVIT	TY, IF ANY, OF S	OURCE
DATE (mm/dd/yy) VALUE E	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
			\$	
			\$	
			\$	
NAME OF SOURCE		► NAME OF SOURCE		M
ADDRESS (Business Address Acceptable)		ADDRESS (Busines	s Address Accep	table)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	i i	BUSINESS ACTIVIT	Y, IF ANY, OF S	OURCE
DATE (mm/dd/yy) VALUE D	ESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
			\$	<del></del>
	<u>_</u>		\$	
		H , ,		

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements



- Reminder you must mark the gift or income box.
- You are not required to report income from government agencies.

NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):	DATE(S):/ / AMT: \$
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
NAME OF SOURCE	▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S):// AMT: \$
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
Comments:N ⋄ N ∈	